

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>mg</i>		<i>12/19</i>
O.I.P.E. CLASSIFIER		<i>59</i>	<i>9/15</i>
FORMALITY REVIEW	<i>M. M.</i>	<i>21624</i>	<i>10-30-00</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	12/22	
2	✓		
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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